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Catherine A. Sauve (Depositor's name) (Signature ugust 23 2004 (Date

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO. 09/827,764 04/06/2001 Gang Liu 0118-00101 7361

TITLE OF INVENTION: LASER DRIVER FOR A LASER SENSING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	08/23/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS	7	
MENEFEE, JAMES A		2828	372-038090	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Li Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Li "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page names of up to 3 registered patent a gents OR, alternatively, (2) the name irm (having as a member a registered gent) and the names of up to 2 registitorneys or agents. If no name is liste will be printed.	attorneys or of a single attorney or tered patent	& Dunn, P.C.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

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A check in the amount of the fee(s) is enclosed.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity) Docket No. 0118-00101 (37 C.F.R. 1.311) Applicant(s): Gang Liu Examiner Customer No. Group Art Unit Confirmation No. Application No. Filing Date 09/827,764 4/6/01 James A. Menefee 26659 2828 7361 DRIVER FOR A LASER SENSING SYSTEM Invention Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith are the following for the above-identified application. ☑ Issue Fee Transmittal Form PTOL-85 ☑ Utility Fee: \$ 665.00 Plant Fee: ☐ Design Fee: ☑ Publication Fee:3 \$ 300.00 \$995.00 A check in the amount of is attached. The Director is hereby authorized to charge and credit Deposit Account No. 04-1131 as described below. Charge the amount of \boxtimes Credit any overpayment. Charge any additional fee required. Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Dated: August 23, 2004 Signature Robert A. Dunn (Reg. No. 30,556) Dinnin & Dunn, P.C. 2701 Cambridge Ct. Suite 500 Auburn Hills, MI 48326 CC: Certificate of Transmission by Facsimile This certificate may only be used if paying Certificate of Mailing by First Class Mail by deposit account. certify that this document and authorization to charge I hereby certify that this correspondence is being deposited account is being facsimile transmitted to the United States with the United States Postal Service with sufficient postage as and Trademark Office (Fax first class mail in an envelope addressed to "Mail Stop Issue on Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] o_ (Date) Date Signature of Person Mailing Correspondence Signature Typed or Printed Name of Person Signing Certificate Typed or Printed Name of Person Mailing Correspondence